20S

ALABAMA DEPARTMENT OF REVENUE S Corporation Information/Tax Return

CY 🗌	
FY 🗌	2001
SY 🗌	200 I

	1 01 1110 9	- Becomber 61, 2001	, or ourse tax your bogg				, 2001, onding	y		,			
lun	nortont	FEDERAL BUSINESS CODE NUMBER		FEI	DERAL EMPL	OYER II	DENTIFICATION NUMBE	≣R		DEF	PARTMENT USE ON	1LY	
	portant									4			
C	Check	NAME	ME.								Edited By		
	olicable	ADDRESS								- I			
	box:	ADDRESS								NRA's			
In	nitial	OLTY OTATE COUNTRY (IE NOT II O				Τ,	DIOIT ZID OODE						
	eturn	CITY, STATE, COUNTRY (IF NOT U.S.)					9-DIGIT ZIP CODE			K-1's			
Fi	inal	CTATE OF INCORPORATION	NATURE OF BUSINESS			<u> </u>	DATE CHALLETED IN ALA	ADAMA		Reviewed	4 B./		
L R	eturn	STATE OF INCORPORATION	INATURE OF BUSINESS			'	DATE QUALIFIED IN ALA	ADAMA		CN	т Бу		
A	mended				<u> </u>	T.,			_	CN			
L R	eturn	DOES THIS COMPANY OPERATE IN (If yes, complete Schedules B, C, D & I			☐ YES		u filed a return for 20 ess is different, che						
			·		∐ NO	uuui	ooo io umorom, ono	<u>ок пого</u>	누	-			
		DOES THIS COMPANY QUALIFY FOR (If yes, attach required certificates and		ZONE C	REDIT?			▶ ¦	YES				
			•						NO				
		UNLESS A C	OPY OF FORM 1120	OS IS	ATTAC	HED	, THIS RETU	RN IS INCO	MPLE	ETE			
SC	HEDULE	A – Computation of Sepa	arately Stated and N	lonse	paratel	y Sta	ated Income /	/ Tax					
1	Federal O	rdinary Income (Loss) from trade	or business activities						•	1			
2		tions to Alabama Basis: (see ins								'			
		and local net income taxes paid/r				▶ [2a						
		come (loss) from rental real estat					2b						
e e	c. Net inc	come (loss) from other rental acti	vities			▶	2c						
Ĭ		in (loss) under I.R.C. § 1231 (oti				. —	2d						
ē		s not deducted on Federal Form					2e ()				
<u>D</u>	f. Depreciation on I.R.C. § 179 property placed in service prior to 1990					▶	2f ()				
Check or Money Order Here	g. Other (attach schedule)						2g						
€ 3	3 Net Reconciliations (add lines 2a-2g).							ightharpoons	3				
₽ 4	Net Alabar	Alabama nonseparately stated income or (loss) (add lines 1 and 3)								4			
2		this corporation operates in more than one state, carry the amount from line 4 to Schedule E, line 1.)											
$^{\circ}_{\circ}$ 5		parately stated items (business):											
숬	-	ntributions					5a ()				
Ķ	b. Oil and	nd gas depletion				▶	5b ()				
		folio income (loss) net of expenses (attach schedule)					5c						
acl		ualty losses					5d ()				
Attach	e. I.R.C.	C. § 179 expense deduction					5e ()				
	f. Other i	ner items					5f						
6	Net separa	ately stated items (add lines 5a-	5f)						ightharpoonup	6			
7	Total sepa	rately stated and nonseparately	stated income (add lines	4 and 6	5)				•	7			
8		INCOME TAX (see instructions								8			
9	Tax Payme	ents, Credits, and Deferrals:								•			
	a. 2001 e	stimated tax payments and amo	unts applied from 2000 re	eturn			9a						
	b. Payme	ents made with extension				▶ !	9b						
	c. Payme	ents prior to amendment (origina	l return or Department ad	justmer	nt)	▶ [9c						
	d. Tax Cr	edits (from line 4, Schedule G) (see instructions)			▶ [9d						
	e. Total p	ayments (add lines 9a, 9b, 9c, a	ınd 9d)						lacksquare	9e			
10	NET TAX	DUE (subtract line 9e from line 8	3)							10			
11	OVERPAY	MENT (subtract line 8 from line	9e)			<u></u>			•	11			
	a. Amour	nt to be credited to 2002 estimate	ed tax			▶ 1	1a						
	b. Amour	nt to be refunded				▶ 1	1b						
						Γ			\neg				
	REFU	ND WARRANT NUMBER (DEP	ARTMENT USE ONLY)										
12		r late filing and/or late payment (•			<u>-</u>			•	12			
13	Interest du	ie (Internal Revenue Code rate f	from unextended due date	e)						13			
14		MOUNT DUE (add lines 10, 12, a						<u></u>		14			
15	AMOUNT	REMITTED WITH THIS RETUR	N				15						
	a. If navn	nent made through Electronic Fu	inds Transfer (FFT) check	this bo	X				\Box				
	J payii				**********				· <u> </u>				

FORM 20S - 2001 Page 2

RELATED EXPENSE

SCHEDULE B - Allocation of Nonbusiness Income, Loss, and Expense

ALLOCABLE GROSS INCOME OR (LOSS)

Identify by account name and amount all items of nonbusiness income, loss, and expense removed from apportionable income and those items which are directly allocable to Alabama. Adjustment(s) must also be made for any proration of expenses under Alabama Income Tax Rule 810-27-1-4-

DIRECTLY ALLOCABLE ITEMS

23

Other

(Federal 1120S, line

25 Sum of lines 15, 16c, and 24c ÷ 3 = ALABAMA APPORTIONMENT FACTOR (enter here and on line 4, Schedule E)

Alabama gross receipts factor 24a ÷ 24b = 24c

.01(d), which states, "Any allowable deduction that is applicable to both business and nonbusiness income of the taxpayer shall be prorated to each class of income in determining income subject to tax as provided..." (See instructions).

NET OF RELATED EXPENSE

		Column A Everywhere	Column B Alabama		Column C Everywhere	Colum Alaba		Column E Everywhere (Col. A less Col. (C)	Column F Alabama (Col. B less Col. D)
Nonsep	parately stated items									
а										
b										
С										
d										
Separa	tely stated items									
е										
f										
g										
h										
TANGI	BLE PROPERTY AT COST FO ICTION OF BUSINESS INCO		E BEGINNING OF YEA		BAMA END OF	YEAR	BEGIN	EVERY	WHERE	END OF YEAR
1	Inventories									
2	Land									
3	Furniture and fixtures									
4	Machinery and equipm									
5	Buildings and leaseho									
6	IDB / IRB property (at									
7	Government property	(at FMV)								
8										
9										
10	Less construction in projection (if included above)	rogress								
11	Totals									
12	Average owned prope	rty (BOY + EOY ÷ 2)								
13	Annual rental expense	for this year		х8	=			x8	=	
14	Total average property	/		14a				14b		-
15	Alabama property fa	ctor 14a ÷ 14b = Line	15					15	>	%
	IES, WAGES, COMMISSIONS ED TO THE PRODUCTION O	S & OTHER COMPENSATION F BUSINESS INCOME			16a ALAB	AMA	16b E\	VERYWHERE	16c	
16	Alabama payroll fact	or 16a ÷ 16b = 16c								%
SALE	S				ALABA	.MA	EV	ERYWHERE		
17	Destination sales (see	instructions)								
18	Origin sales (see instr	uctions)								
19	Total gross receipts fro	om sales								
20	Capital and ordinary g	ains gross proceeds								
21										
	Rents									

24a

24b

24c

FORM 20S – 2001 Page 3

•						
SC	HEDULE D – Apportionment of Federal Income Tax					
1	Enter the federal income tax from Federal Form 1120S,			1		
2	Enter the Alabama income from line 7, Schedule E below, if applicable. (If corporation operates					
	exclusively in Alabama, do not complete lines 2-8.)	2	-	-		
3	Separately stated items apportioned 3a	3с				
4	(line 6, Schedule A) Apportionment Factor (Line 25, Sch. C)					
4	Separately stated items allocated to Alabama (Column F, lines e, f, g, and h, Schedule B)	4				
_						
5	Total (add lines 2, 3c, and 4)▶	5		-		
6	Adjusted total income (add line 7, Sch. A and lines e, f, g, h, Col. E, Sch. B)	6			1	
7	Federal income tax apportionment factor (line 5 ÷ line 6)			7		%
•				'		
8	Federal income tax apportioned to Alabama (multiply line 1 by the percent on line 7)			8		
	HEDULE E – Apportionment and Allocation of Income to Alabama (Complete				r states)	
1	Income or (loss) from line 4, Schedule A			2		1
2	Apportionable income or (loss) (add lines 1 and 2)			3		
4	Apportionment ratio from line 25, Schedule C			4		%
5	Income or (loss) apportioned to Alabama (multiply amount on line 3 by percent on line 4)			5		
6	Nonseparately stated income or (loss) allocated to Alabama (Column F, lines a, b, c, and d, Schedu	lule B))	6		
7	Alabama Income (add lines 5 and 6). Enter here and also on line 2, Schedule D		>	7		
SC	HEDULE F – Alabama Accumulated Adjustments Account					
	Beginning balance (prior year ending balance)			1		
1	beginning balance (prior year enoing balance)			<u> </u>		
2	Income or (loss) (line 4, Schedule A)			2		
3	Separately stated items (line 6, Schedule A)	3				
4	Federal income tax deduction (line 1, Schedule D)	4				
5	Separately stated nonbusiness items (lines e, f, g, h, Column E, Schedule B)		5			
6	Other additions/(reductions) (Do not include tax exempt income and related expenses)			6		
7	Less distributions			7		
R	Ending halance (total appropriate lines)			l Q	I '	

FORM 20S – 2001 Page 4

Prepar Use O		Firm's name (or yours if self-employed) - and address					E.I. No.		
Paid		Preparer's signature				Date		Preparer's socia	al security no.
		Your signature			Title or Position		Date		
Please Sign Here	• •	Under penalties of pe are true, correct, and	rjury, I declare that I have complete. Declaration of	e examined this return preparer (other than ta	and accompanying schedu ixpayer) is based on all info	les and statements, ormation of which pr	and to the bes eparer has any	st of my knowledge v knowledge.	and belief they
					Telephone (_)			
Location	n of the corpo	rate records:			Name				
Enter th	is company's	Alabama Withholding	Fax Account #		Person to contact for	r information cond	erning this re	turn:	
Briefly d	lescribe your	Alabama operations: $_$							
Indicate	tax accounting	ng method used:	L Cash	Accrual	U Other				
0011		me renewing in				oonolaoloa o	omproto		
	•				This Return To Be			4	
								4	
)		⊢	3	
							_	2	
		- Tax Credits <i>(Cau</i>							

CHECK LIST

HAVE THE FOLLOWING FORMS BEEN ATTACHED TO THE FORM 20S:
ALABAMA SCHEDULE K-1 (for all shareholders)
ALABAMA SCHEDULE NRA (if applicable)
FEDERAL FORM 1120S (entire form as filed with IRS)
FEDERAL FORM 1120S PROFORMA (if applicable)